

**City of Riverside**

3900 Main Street – Riverside, CA 92522

(909) 826-5465 Monday – Friday 8:00 a.m. – 4:00 p.m.

**BUSINESS TAX APPLICATION***MUST BE RETURNED IN PERSON, CANNOT BE MAILED***GENERAL INFORMATION**

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Address Zone: ☐ Commercial ☐ Manufacturing ☐ Residential ☐ Other: \_\_\_\_\_

Business Name: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Ownership Type: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Riverside Start Date: \_\_\_\_\_ Business Telephone No: \_\_\_\_\_ Business e-mail: \_\_\_\_\_

Federal Tax I.D. No: \_\_\_\_\_ Social Security No: \_\_\_\_\_ Sellers Permit No: \_\_\_\_\_

State Contractors License No: \_\_\_\_\_ Classification: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Describe Type of Business: \_\_\_\_\_ Alcoholic Beverage Sales: ☐ Yes ☐ No**OWNER/OFFICER INFORMATION**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

PAYMENT OF THIS TAX DOES NOT CONSTITUTE ZONING OR BUILDING CODE APPROVAL. CHECK WITH THE PLANNING DEPARTMENT IN ORDER TO DETERMINE IF YOUR BUSINESS CAN BE LEGALLY ESTABLISHED AT YOUR LOCATION.

I declare under penalty of perjury that the above statements are true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**FINANCE DEPARTMENT USE ONLY – DO NOT WRITE BELOW THIS LINE**

| Account No:                              | Location:   | Type: | Rate: | Expiration Date: | Received By:     | Source: | Date Received:   |
|--|---|-------|-------|------------------|------------------|---------|--|
| ID. No:<br><br>Applicant/<br>Contact No: | TAX CALCULATION:<br>Estimated Gross: _____<br>Base Tax: _____<br>Tax 1: _____<br>Tax 2: _____<br>Adjustment: _____<br>Penalty: _____<br>Subtotal: _____<br>BID: _____<br>Total Due: _____ |       |       |                  | Details/Remarks: |         | Approvals:<br>Department:<br><br>Approved By: _____<br><br>Date Approved: _____<br><br>Comments: _____ |